

Collaboration: The Key to Building Healthy, Equitable Communities!

Darrin W. Anderson, Sr., PhD, MS

New Jersey Partnership for Healthy Kids
Communities Making a Difference to Prevent Childhood Obesity

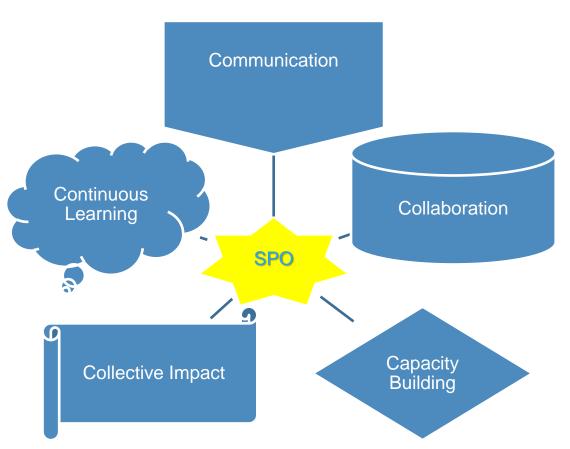
State Program Office

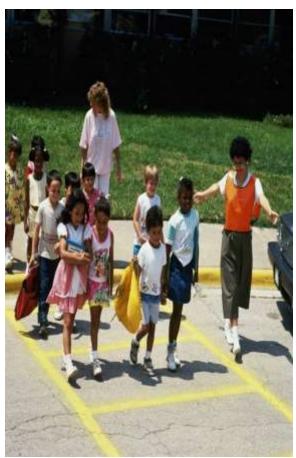


New Jersey Partnership for Healthy Kids, a State Program Office of the Robert Wood Johnson Foundation (RWJF) with technical assistance and direction provided by the NJ YMCA State Alliance, connects, convene and empowers community partnerships and collective impact efforts to advance policy, environmental and system change that help children achieve a healthy weight.

Technical Assistance







New Jersey Partnership for Healthy Kids

Communities Making a Difference to Prevent Childhood Obesity

NOTICE

THIS DEPARTMENT REQUIRES NO PHYSICAL FITNESS PROGRAM.

JUMPING TO CONCLUSIONS, FLYING OFF THE HANDLE, RUNNING DOWN THE BOSS, KNIFING FRIENDS IN THE BACK, DODGING RESPONSIBILITY, AND PUSHING THEIR LUCK.

Collaboration Principles



Ideal World	Real World
Shared Vision	Play Fair
Adapt to Emerging Opportunities	Ameba
Borrow & Build	Steal Shamelessly
Engage	Threaten
Serve in multiple roles	Windex!
Use data to guide, not drive	Gas!
Distribute Ownership	Don't be a ball hog!

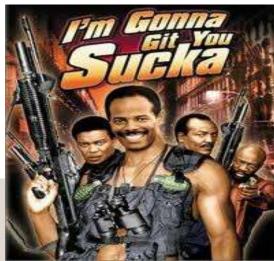
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YUSA-Leading Practices in Urban Settings: PHC'S 7 Leading Practices

Great Collaborations



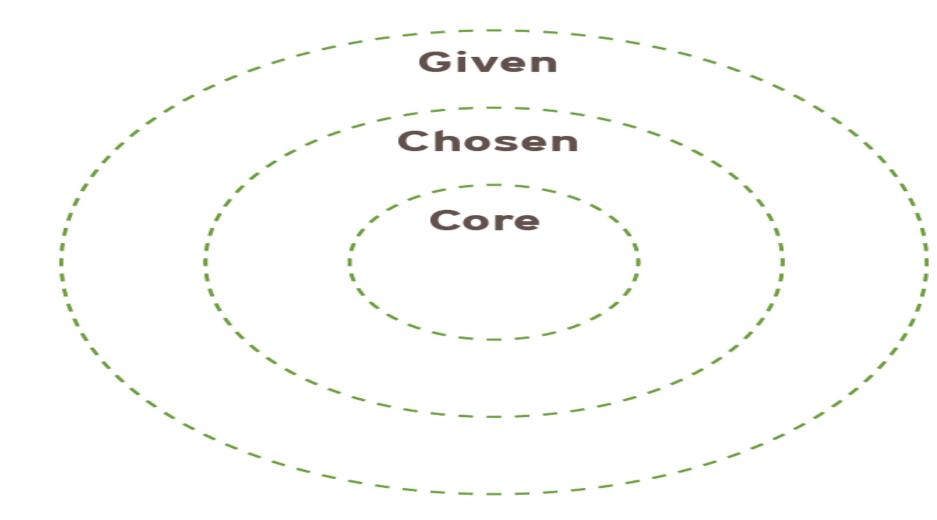








Social Identity Mapping



The Spectrum of Community Engagement



- Community *notification* inform the community of the intentions of the project/program risks and benefits relating to the individuals and communities involved.
- Community *consent* obtaining some expression of community approval.
- Community *endorsement* community representatives are asked to formally support the activities.
- Community *participation* seeking and obtaining community advice in planning, development, execution, and dissemination of the research.
- Community *origination* research purpose and goals set by community residents

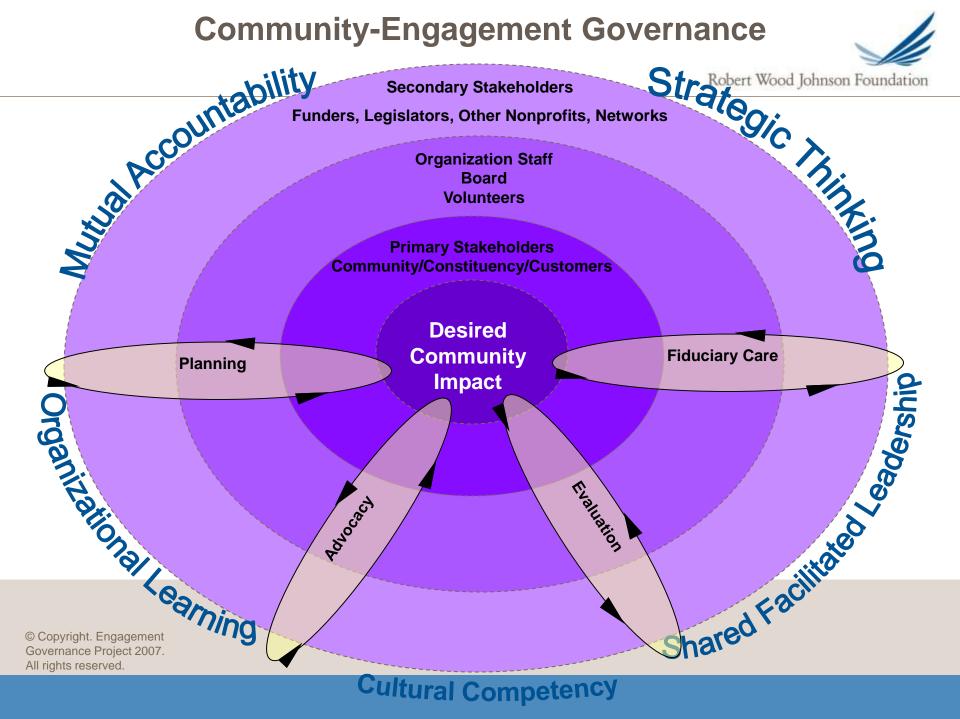
Jenkins, B. "Health Disparities: Why we have not solved the problem, Why we need new approaches." The Research Center on Health Disparities, Morehouse College, April 2004.

Unchartered Territory









Community Competent





Mason et al.'s Cultural Competence Model (1996)



Cultural Competence

Cultural Destructiveness	Refusal to acknowledge the presence or importance of cultural differences; Differences are punished and suppressed; Schools endorse the myth of universality.

Cultural Incapacity The individual or organization chooses to ignore cultural differences; No attention is devoted to supporting cultural differences; Emphasis may be on the cognitive growth and maturity of youngsters versus addressing the issues of cultural awareness.

Cultural Blindness Individuals and organizations believe that cultural differences are of little importance; People are viewed through a western cultural mainstream lens; Messages are communicated to students that their culture is of little consequence to the learning experience.

The individual or organization recognizes and **Cultural Pre-Competence** responds to cultural differences; There is an open acknowledgement of the need for cultural competence: Educators may seek out new

> information regarding diversity by attending training sessions or interacting with those individuals who have insider cultural information. The individual and organization value and appreciate cultural differences; Exploration of issues related to equity, cultural history, knowledge, and social justice; Students' cultural experiences are valued and integrated into the learning process.

Six Ways To Talk About Social Determinants of Health



- Health starts, long before illness, in homes, schools and jobs
- All American should have opportunity to make the choices that allow them to live a long, healthy life, regardless of their income, education or ethnic background
- Your neighborhood or job shouldn't be hazardous to your health
- Your opportunity for health starts long before you need medical care
- Health begins where we live, learn, work and play.
- The opportunity for health begins in our families neighborhood, schools and jobs.

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Why these work:

- The proxy statements use colloquial, values-driven language and relatable lifestyle references that engage people.
- These statements all focus on the solution versus the problem.
- Some of the statements implicitly acknowledge the notion of personal responsibility

How would you communicate these terms!



- Vulnerable Populations
- Health Disparities
- Poverty
- Low-income families
- Violence
- Refugees and Immigrants
- Youth & Teens

How would you communicate these terms!



- Vulnerable Populations
 - American who face significant barriers to better health
- Health Disparities
 - Raising the bar for everyone
- Poverty
 - Families who cannot afford the basic in life
- Low-income workers and families
 - People who work for a living and still can't pay their rent

- Violence
 - Unsafe Streets
- Refugees and Immigrants
 - People seeking a new home in America
- Youth & Teens
 - The years of danger and opportunity